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BIBDATASHEET

CONFIRMATION NO. 3539

Bib Data Sheet

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|--|---|---|---|---|
| SERIAL NUMBER 09/924,857 | FILING OR 371(c) DATE 08/08/2001 RULE | CLASS 424 | GROUP ART UNIT 1644 | ATTORNEY DOCKET NO. P0378P3C6 |
| APPLICANTS Donogh P. O'Brien, Harrow, UNITED KINGDOM; Gordon A. Vehar, San Carlos, CA; | | | | |
| ** CONTINUING DATA ***** This application is a CON of 08/476,837 06/07/1995 PAT 6,274,142 and is a CON of 08/260,662 06/16/1994 PAT 5,589,173 and is a CON of 08/076,280 06/11/1993 ABN and is a CON of 07/887,575 05/18/1992 ABN and is a CON of 07/237,595 08/25/1988 ABN and is a CIP of 07/209,665 06/21/1988 ABN and is a CIP of 07/110,255 10/20/1987 ABN and is a CIP of 06/926,977 11/04/1986 ABN | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/30/2001 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | STATE OR COUNTRY UNITED KINGDOM | SHEETS DRAWING 9 | TOTAL CLAIMS 1 |
| Verified and Acknowledged _____ Examiner's Signature Initials | | INDEPENDENT CLAIMS 1 | | |
| ADDRESS 09157 | | | | |
| TITLE METHODS FOR THE TREATMENT COAGULATION DISORDERS: WITH LIPOPROTEIN ASSOCIATED COAGULATION INHIBITOR (LACI) | | | | |
| FILING FEE RECEIVED 710 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |



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** 08/30/2001

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|---|---|------------------------------------|---------------------|-------------------|-------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Allowance | STATE OR COUNTRY UNITED KINGDOM | SHEETS DRAWING 9 | TOTAL CLAIMS 1 | INDEPENDENT CLAIMS 1 |
|---|---|------------------------------------|---------------------|-------------------|-------------------------|

Verified and Acknowledged
Examiner's Signature _____ Initials _____

ADDRESS
09157

TITLE METHODS FOR THE TREATMENT OF COAGULATION
DISORDERS WITH LIPOPROTEIN ASSOCIATED COAGULATION
Method and therapeutic compositions for the treatment of myocardial infarction INHIBITOR (LACI)

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